City of Chicopee Registrars of Voters City Hall 274 Front Street Chicopee, MA 01013-2885

Resident Address:

Signature of Respondent

Signed under the Penalties of Perjury as Prescribed by M.G.L. 56, §4.

IMPORTANT LEGAL DOCUMENT ANNUAL STREET LISTING

2015

IMPORTANT: General Laws of Massachusetts mandate an annual street listing of residents as of January 1 each year. Update the information provided by adding, deleting, or making changes below the printed information. Please sign and respond within ten (10) days, even if no changes are necessary. For assistance, call **CITY REGISTRAR AT 413-594-1550**

← If this address is incorrect, make corrections below

WARNING: Failure to respond to this mailing shall result in removal from the active voting list and may result in removal from the voter registration rolls. Telephone #:											
Voter	EASE PRINT	NAME First	Middle	Mail To	Gender M/F	Date of Birth mm/dd/yyyy	Occupation	M - Moved D - Deceased	Nationality (If not U.S. citizen)	U.S. Veteran	
								20		ר	

CHICOPEE PUBLIC LIBRARIES
See Reverse Side For More Instructions

COUNCIL ON AGING: 5 West Main Street CHICOPEE ELECTRIC LIGHT: 725 Front Street

locations:

ENTER NUMBER OF DOGS

* For your convenience, you may drop this form off at one of these

COLLECTOR'S DROP-OFF BOX - IN FRONT OF CITY HALL ANNEX

SPECIAL INSTRUCTIONS: Return IMMEDIATELY.

COMPLIANCE with this State requirement provides an official proof of city residency to protect voting rights, veterans' bonus, use of the Chicopee landfill, housing for the elderly and related benefits. as well as providing information for selection of jurors. This form DOES NOT register you as a voter.

GENERAL INSTRUCTIONS: Please Print

- 1. Verify and/or complete all information listed on the form.
- 2. List ALL family or household members age 3 and up whose legal address is the same. Include any member of the family in Military Service, away at school or confined to a rest home whose legal residence is the same.
- 3. Make all changes on the SHADED LINE below the printed line.
- 4. If a NEW MEMBER has been added to the family or household, enter the name and information on the blank line at the end of this form.
- 5. Put a line through the name of any resident no longer residing at this address and list his/her new address, if available.
- 6. MOVED/DECEASED Enter "M" or "D" if appropriate.
- 7. MAIL TO Designates the person in your household to whom mail should be addressed. If you wish to change enter an "X" next to that individuals name.
- 8. OCCUPATION: Enter occupation not place of employment.
- 9. NATIONALITY Enter only if not U.S. citizen.
- 10. VETERAN: Check if you are a U.S. Veteran.
- 11. PUBLIC SAFETY Check this box if you are a member of a public agency and live in this community.
- 12. # OF DOGS Number of dogs licensed to this individual.
- 13. To return this form, tri-fold form and insert into return envelope provided and mail.

Thank you for your cooperation.



REGISTRAR OF VOTERS OFFICE
IS A PASSPORT ACCEPTANCE FACILITY
Hours of Passport Acceptance. M-F 9:00 a.m - 4:30 p.m